

PART B - FEES) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
 or **EX** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if requested). Blocks 1 through 5 should be completed when applicable. All further correspondence including the Patent, advance notice of publication of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; similar (in indicating a separate "FEE ADDRESS" for maintenance fee notifications).

COMMITTEE ON CORRESPONDENCE OF 412.107.000 (See: This Block 1 for any change of address)

Note: A certificate of mailing and only be used for domestic mailing of the fees) Transmitted. This certificate cannot be used for any other accompanying paper. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

6140 7501 66000010

GENERAL ELECTRIC COMPANY
GLOBAL RESEARCH
ONE RESEARCH CIRCLE
BLDG. K1-3A59
NISKAYUNA, NY 12309

Certificate of Mailing or Transmission
 I hereby certify that this Fee(s) Transmitted is being deposited with the United States Postal Service with sufficient postage for first class mail to no envelope addressed to the Mail Stop ISSUE FEE, unless otherwise, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Signature of sender)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	EXAMINATION NO.
-----------------	-------------	----------------------	---------------------	-----------------

00723.01E	1/18/2009	Mueta L. Lohandwala	U3558	9461
-----------	-----------	---------------------	-------	------

TITLE OF INVENTION - COMPRISSION PADDLE MEMBRANE AND TENSINING APPARATUS FOR COMPRESSING TISSUE FOR MEDICAL IMAGING PURPOSES

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	PROV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE PAID
------------	--------------	-----------	-----------------	----------------------	------------------	-----------

nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/15/2010
----------------	----	--------	-------	-----	--------	------------

EXAMINER	ART UNIT	CLASSIFICATION
----------	----------	----------------

CHUNG, JINCHULIN	3708	600-427000
------------------	------	------------

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.330)
- ☐ A change of correspondence address for Change of Correspondence Address Form PTO/BD/127 attached.
- ☐ "Fee Address" indication for "Fee Address" Indication Form PTO/BD/127 Rev. 03-02 or more recent attached. Use of a Customer Number is required.
2. For printing on the patent front page, has
- (1) the names of up to 2 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm acting as a member a registered attorney or agent; and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1. Jennifer E. Haeckl
- 2.
- 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
- (PLEASE NOTE: Data on an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as of 8:00 a.m. 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.)
- (A) NAME OF ASSIGNEE
- (B) RESIDENCE (CITY and STATE OR COUNTRY)

General Electric Company

Niskayuna, New York

Please check the appropriate assignee category as categorized (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4. The following fee(s) are submitted:
- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount provided)
- ☐ Advance Order - # of Copies
5. Payment of Fee(s) (Fees not previously paid issue fee shown above)
- ☐ A check is enclosed.
- ☐ Payment by credit card Form PTO-2036 is attached.
- ☒ The Fee(s) is hereby authorized to charge the paying fee(s), any deficiency, or credit any overpayment, to Deposit Account Number: 0110586 (Indicate on card copy of this form)

6. Change in Entity Status (from status indicated above)
- ☒ a. Applicant claims SMALL ENTITY status See 37 CFR 1.22.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status See 37 CFR 1.22(g)(1).
- NOTE: The Issue Fee and Publication Fee (if requested) will not be accepted from anyone other than the applicant, a registered attorney or agent or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized signature: /Jennifer E. Haeckl/ Date: 9/15/2010

Typed or printed name: Jennifer E. Haeckl Registration No.: 61812

This collection of information is required by 37 CFR 1.31, the information is required to obtain or retain a benefit by the public which is to be filed (and by the USPTO) process a registration. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.34. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form under investigation for obtaining this benefit, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.